

BEST AVAILABLE COPY

CLAIMS ONLY								Application Number 10-701463		Filing Date		
								Applicant(s)				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51					
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43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Claims	3						Total Claims					
Total Depend.	2						Total Depend.					
Total Claims	5						Total Claims					